## Case 16-35921 Doc 1 Filed 11/10/16 Entered 11/10/16 15:00:25 Desc Main Document Page 1 of 57

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	Al	bout Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Michael First name	Fi	rst name
	license or passport).	Middle name	Mi	iddle name
	Bring your picture identification to your meeting with the trustee.	Scheidt Last name and Suffix (Sr., Jr., II, III)	La	ast name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1391		

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Document Case number (if known) Debtor 1 Michael A. Scheidt

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs			
5.	Where you live	1303 Green Trails Drive Plainfield, IL 60586	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
Will			County			
		County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Desc Main

Case number (if known) Debtor 1 Michael A. Scheidt

	The chapter of the Bankruptcy Code you are			rief description of each, see go to the top of page 1 and			.C. § 342(b) for Individuals Filin	ng for Bankruptcy
	choosing to file under	■ Ch	napter 7					
		☐ Ch	napter 11					
		☐ Ch	napter 12					
		☐ Ch	napter 13					
3.	How you will pay the fee		about how yo	u may pay. Typically, if you a attorney is submitting your p	are paying	the fee yourself,	the clerk's office in your local co you may pay with cash, cashie ur attorney may pay with a credi	r's check, or money
			I need to pay	the fee in installments. If		e this option, sigr	n and attach the Application for	Individuals to Pay
			Ū	e in Installments (Official Fo	,	this option only i	if you are filing for Chapter 7. B	v law a judgo may
			but is not requapplies to you	uired to, waive your fee, and Ir family size and you are un	may do so able to pay	only if your inco the fee in instal	ome is less than 150% of the off Iments). If you choose this option om 103B) and file it with your pe	icial poverty line tha on, you must fill out
).	Have you filed for bankruptcy within the	■ No						
	last 8 years?	☐ Ye			14//		0	
			District		When		Case number	
			District		When		Case number	
			District		When		Case number	
0.	Are any bankruptcy cases pending or being	□ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ Yes	S.					
			Debtor	Michelle H. Scheidt			Relationship to you	Spouse
			District	Northern District of Illinois	When	2/22/16	Case number, if known	16-05669
			Debtor				Relationship to you	
			District		When		Case number, if known	
	Danier and com		0-1-1	10				
11.	Do you rent your residence?	■ No						
		☐ Ye	<sub>s.</sub> Has yo	ur landlord obtained an evic	tion judgme	ent against you a	and do you want to stay in your	residence?
				No. Go to line 12.				
				V = = 1 1 11 1 0 1			ent Against You (Form 101A) a	and the following data

Debtor 1 Michael A. Scheidt Page 4 of 57

Case number (if known)

Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code			
	it to this petition.		Checi	k the appropriate bo	x to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most re deadlines. If you indicate that you are a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach your most re to deadlines a small business debtor, you must attach		a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure						
	For a definition of small	No.	I am r	not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to	□ res.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
					Number, Street, City, State & Zip Code			

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Debtor 1 Michael A. Scheidt

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1	Michael A. Scheidt	Document	Page 6 of 57	Case number (if known)	
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Part	6: Answer These Questi	ons for Re	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,			J.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily busine money for a business or investme				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe th	at are not consumer debts o	r business debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availabl			uded and administrative expenses	
	are paid that funds will						
	be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you	<b>1</b> -49		<b>1</b> ,000-5,000		5,001-50,000	
	owe?	□ 50-99		☐ 5001-10,000 ☐ 10,001,35,000		0,001-100,000	
		☐ 100-19 ☐ 200-99		☐ 10,001-25,000	LI IVI	ore than100,000	
19.	How much do you estimate your assets to	□ \$0 - \$ <i>t</i>	,	□ \$1,000,001 - \$10 million		500,000,001 - \$1 billion	
	be worth?		01 - \$100,000	□ \$10,000,001 - \$50 milli □ \$50,000,001 - \$100 mill		1,000,000,001 - \$10 billion 10,000,000,001 - \$50 billion	
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 m		ore than \$50 billion	
20.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	n 🗆 \$5	500,000,001 - \$1 billion	
	estimate your liabilities to be?		01 - \$100,000			\$1,000,000,001 - \$10 billion	
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million				10,000,000,001 - \$50 billion Nore than \$50 billion	
Part	7: Sign Below						
For	you	I have ex	amined this petition, and I declare u	under penalty of perjury that	the information prov	ided is true and correct.	
			chosen to file under Chapter 7, I amates Code. I understand the relief a				
			ney represents me and I did not pa t, I have obtained and read the noti			ey to help me fill out this	
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					s petition.		
I understand making a false statement, concealing property, or obtaining money or property by fraud in connec bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 1 and 3571.							
		Michael	ael A. Scheidt A. Scheidt of Debtor 1	Signature	of Debtor 2		
		Executed	on _ <b>November 10, 2016</b>	Executed	on		
			MM / DD / YYYY		MM / DD / YYY	/Υ	

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Debtor 1 Michael A. Scheidt Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John A. Reed	Date	November 10, 2016
Signature of Attorney for Debtor	_	MM / DD / YYYY
John A. Reed		
Printed name		
John A. Reed Ltd.		
Firm name		
63 W. Jefferson Street # 200		
Joliet, IL 60432		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	
02299909		
Bar number & State		

		DOCUM	<u>eni Pade 8 0157</u>	
ill in this infor	mation to identify your	case:		
Debtor 1	Michael A. Scheid	lt		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				

☐ Check if this is an amended filing

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	175,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,050.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	199,050.00
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	187,404.50
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,491.52
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	150,726.60
	Your total liabilities	\$	340,622.62
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,860.50
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,823.30
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Case number (if known) Debtor 1 Michael A. Scheidt

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: <b>OR</b> . Form 122B Line 11: <b>OR</b> . Form 122C-1 Line 14.

4,727.18

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	2,491.52
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	6,774.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	9,265.52

	Ca	ase 16-35921	Doc 1		11/10/16 ument	Entered 11/10/16	5 15:00:25	Des	c M	lain	
Fill	in this infor	mation to identify	your case and th								
Deb	otor 1	Michael A. So	cheidt								
		First Name	Middle	e Name		Last Name					
	otor 2 ouse, if filing)	First Name	Middle	e Name		Last Name					
Unit	ted States Ba	ankruptcy Court for t	the NORTHER	N DISTE	RICT OF ILLIN	NOIS					
		ariki aptoy Court for t	110.			10.0					
Cas	se number					-		I		Check if this is a amended filing	n
									•	amended ming	
<b>~</b> t	<i>c</i> : -: -	400 A /D									
_		orm 106A/B									
<u>Sc</u>	chedul	le A/B: Pr	operty							12/15	
hink nfor nsv	t it fits best. It mation. If mo	Be as complete and a re space is needed, a stion.	ccurate as possibl ttach a separate s	le. If two r heet to th	narried people is form. On the	in asset fits in more than one of e are filing together, both are e e top of any additional pages, v	qually responsible	le for sup	plyin	g correct	
											_
. D	o you own or	nave any legal or equ	litable interest in a	any reside	nce, building,	land, or similar property?					
	No. Go to Pa	rt 2.									
	Yes. Where	is the property?									
1.1				What	e the property	? Check all that apply					
1.1	1303 Gre	en Trails Drive		vviiat	Single-family h		Do not doduct on	مناهاه مامان		avametiana Dut	
	Street address	, if available, or other desc	ription		Duplex or mult		Do not deduct see	y secured	claim	s on Schedule D:	
					•	or cooperative	Creditors Who Ha	ave Claims	s Sec	ured by Property.	
				_	Manufactured	or mobile home					
	Plainfield	ı IL	60586-0000		Land	of mobile nome	Current value of entire property?			ent value of the on you own?	
	City	State	ZIP Code		Investment pro	pperty	\$175,00		рол	\$175,000.0	)
					Timeshare		Describe the nat	ure of vo	ur ow	nership interest	
					Other		(such as fee sim	ple, tenai		y the entireties, o	r
				Who h	Debtor 1 only	in the property? Check one	a life estate), if k	illowii.			
	Will			_	Debtor 2 only						_
	County				Debtor 1 and [	Debtor 2 only	Ob a ale if their	. !			
					At least one of	the debtors and another	Check if this (see instruction		nunity	/ property	
					information yo	ou wish to add about this item on number:	such as local				
											_
											$\neg$

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$175,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Dob	tor 1	Case 16-35921	Doc 1	Filed 11/10/16 Document	Entered 11/10 Page 11 of 57	/16 15:00:25	Desc Main			
		Michael A. Scheidt	m44:11:45.2 5.0 da	ialaa matarayalaa		ase number (ii known)				
3. <b>C</b>	ars, va	ns, trucks, tractors, spo	rt utility ven	nicles, motorcycles						
	No									
•	Yes									
3.1 Make: Dodge Model: Caravan				Who has an interest in the	e property? Check one	the amount of any s	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.			
	Year:			■ Debtor 1 only □ Debtor 2 only						
		oximate mileage:	6000	Debtor 1 and Debtor 2 of	nly	Current value of the entire property?	ne Current value of the portion you own?			
	Othe	r information:		☐ At least one of the debto	ors and another					
	Helo	I in j/t with non-filing use		Check if this is commu	inity property	<b>\$22,790.</b>	\$22,790.00			
.p Part	ages y	ou have attached for Pa	rt 2. Write the	n for all of your entries from the from the from the from the from the followers in any of the followers in any of the followers.			\$22,790.00  Current value of the			
<i>E</i>	xample No	old goods and furnishings: Major appliances, furn		china, kitchenware			portion you own?  Do not deduct secured claims or exemptions.			
	• Yes.		urniture, A	Appliances & Furnishi	ngs		\$400.00			
	] No	es: Televisions and radios including cell phones,  Describe	cameras, me	edia players, games	ment; computers, printe	rs, scanners; music co	llections; electronic devices			
		TV, Co	mputer, C	ell Phone			\$300.00			
E	xample ■ No	oles of value es: Antiques and figurines other collections, mem Describe			oks, pictures, or other art	objects; stamp, coin,	or baseball card collections;			
E	xample ■ No	ent for sports and hobbi es: Sports, photographic, musical instruments Describe		d other hobby equipment; I	picycles, pool tables, gol	f clubs, skis; canoes a	nd kayaks; carpentry tools;			
10. I	Firearm	ıs	ns, ammuniti	on, and related equipment						

Debt	tor 1	Case 16-3 Michael A. So		Doc 1	Filed 11/10/16 Document	Entered Page 12	11/10/16 15:00:25 of 57 Case number (if known)	Desc Main
	Yes.	Describe						
	] No		thes, furs,	, leather coats	s, designer wear, shoe	s, accessories		
			Everyda	ay clothing	, shoes, coats			\$400.00
_	No		elry, cost	ume jewelry,	engagement rings, we	dding rings, heirl	oom jewelry, watches, gems, g	old, silver
	Examp I No	rm animals oles: Dogs, cats, b Describe	irds, horse	es				
			2 dogs					\$50.00
	No Yes.	Give specific info	rmation	 our entries fr		any entries for	pages you have attached	\$1,150.00
		scribe Your Financ vn or have any le		uitable intere	est in any of the follo	wing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examp I No			-	our home, in a safe de		n hand when you file your petition	on
							Cash	\$10.00
	Examp ] No				I accounts; certificates ounts with the same ir Institution	stitution, list eac	es in credit unions, brokerage h h.	nouses, and other similar
			17.1.	Checking	Chase E	Bank # 5480		\$100.00
19. <b>N</b>	Examp I <sub>No</sub> I Yes Non-pu joint v		nvestmen Ir	nt accounts wi	th brokerage firms, mo	·		t in an LLC, partnership, and
	No Yes.	Give specific info	rmation al	bout them				

5.1.		ase 16-35921	Doc 1	Filed 11/10/16 Document	Entered 11/10/16 15:00:25 Page 13 of 57	Desc Main
Debt	tor 1 Mic	hael A. Scheidt			Case number (if known)	
		Nam	ne of entity:		% of ownership:	
	Negotiable i Non-negotia I No	nstruments include poble instruments are the specific information a	ersonal check hose you canr		egotiable instruments missory notes, and money orders. by signing or delivering them.	
	<i>Examples:</i> Ir I No	or pension accounts nterests in IRA, ERIS ach account separate	A, Keogh, 40 <sup>-</sup>	1(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing	plans
	res. List ea	•	f account:	Institution n	ame:	
		401(k)	)	Debtor's	retirement at place of employment	Unknown
_	Your share o	greements with land	you have ma	rent, public utilities (elec	tinue service or use from a company stric, gas, water), telecommunications compan ame or individual:	nies, or others
23. <b>A</b>	Annuities (A	contract for a period	ic payment of	money to you, either for	life or for a number of years)	
	l <sub>No</sub> l Yes	Issuer name	and descript	ion.		
2		530(b)(1), 529A(b), a	ınd 529(b)(1).		regram, or under a qualified state tuition program, or under a qualified state tuition program as a second state tuition as a second s	
25. <b>T</b>			ests in prope	rty (other than anythin	g listed in line 1), and rights or powers exe	ercisable for your benefit
	Yes. Give	specific information a	about them			
_	<i>Examples:</i> İr İ No	nternet domain name	s, websites, p	ets, and other intellecturoceeds from royalties a	al property nd licensing agreements	
	Yes. Give	specific information a	about them			
_	Examples: B No	anchises, and other Building permits, exclusions specific information a	usive licenses		n holdings, liquor licenses, professional licens	es
Mon	ey or prope	erty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	ax refunds	owed to you				
		specific information a	bout them, inc	cluding whether you alre	ady filed the returns and the tax years	
	No			usal support, child suppo	ort, maintenance, divorce settlement, property	settlement

		Case 16-35	921	Doc 1		Entered 11/10/16 15:00:25	Desc Main
De	btor 1	Michael A. Sch	eidt		Document	Page 14 of 57 Case number (if known)	
ı	Exam	amounts someone uples: Unpaid wages, benefits; unpaid	disabili d loans	ty insurance ¡	payments, disability bend someone else	efits, sick pay, vacation pay, workers' comper	nsation, Social Security
1	Exam ■ No	,	y, or life	,	nealth savings account (I	HSA); credit, homeowner's, or renter's insuran	ce
				pany name:		Beneficiary:	Surrender or refund value:
ı	If you some		f a livin		someone who has die ct proceeds from a life ins	d surance policy, or are currently entitled to rece	eive property because
ļ	Exam ■ No		loymen		you have filed a lawsui surance claims, or rights	t or made a demand for payment to sue	
-	No	contingent and unli		ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
I	No	nancial assets you		already list			
36.						ny entries for pages you have attached	\$110.00
Par	t 5: De	escribe Any Business-	Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
•	No. G	own or have any legal o to Part 6. Go to line 38.	or equi	table interest	in any business-related pr	roperty?	
Par		escribe Any Farm- and you own or have an inte			Related Property You Own	n or Have an Interest In.	
46.	■ No.	u own or have any l . Go to Part 7. s. Go to line 47.	egal or	equitable in	nterest in any farm- or c	commercial fishing-related property?	
Par	t 7:	Describe All Proper	rty You (	Own or Have a	an Interest in That You Did	Not List Above	
		u have other proper ples: Season tickets,			did not already list? ership		

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

☐ Yes. Give specific information.......

\$0.00

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Case number (if known) Document Debtor 1 Michael A. Scheidt

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$175,000.00
56.	Part 2: Total vehicles, line 5	\$22,790.00		
57.	Part 3: Total personal and household items, line 15	\$1,150.00		
58.	Part 4: Total financial assets, line 36	\$110.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$24,050.00	Copy personal property total	\$24,050.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$199,050.00

Official Form 106A/B Schedule A/B: Property page 6

		I A A A HILL.		
Fill in this informa	ation to identify your	case:		
Debtor 1	Michael A. Scheid	dt		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Banl	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Proper	y You Claim as Exempt
-----------------------------	-----------------------

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	-------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
1303 Green Trails Drive Plainfield, IL 60586 Will County	\$175,000.00		\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2015 Dodge Caravan 6000 miles Held in j/t with non-filing spouse	\$22,790.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Misc Furniture, Appliances & Furnishings	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
TV, Computer, Cell Phone Line from Schedule A/B: 7.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line from Garagae 742. 7.1			100% of fair market value, up to any applicable statutory limit	
Everyday clothing, shoes, coats Line from Schedule A/B: 11.1	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
Line from Generale PVD. 1111			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

otion of the property and line on B that lists this property  Chedule A/B: 16.1	Current value of the portion you own Copy the value from Schedule A/B \$10.00		ount of the exemption you claim ock only one box for each exemption. \$10.00	Specific laws that allow exemption 735 ILCS 5/12-1001(b)
chedule A/B: <b>16.1</b>	Schedule A/B	Che	,	735 ILCS 5/12-1001(b)
chedule A/B: <b>16.1</b>	\$10.00	•	\$10.00	735 ILCS 5/12-1001(b)
onedate A.B. 1911			<u> </u>	. ,
			100% of fair market value, up to any applicable statutory limit	
: Chase Bank # 5480	\$100.00	•	\$100.00	735 ILCS 5/12-1001(b)
Criedule A/D. 1111			100% of fair market value, up to any applicable statutory limit	
-	Unknown		100%	735 ILCS 5/12-1006
			100% of fair market value, up to any applicable statutory limit	
	ebtor's retirement at place ment chedule A/B: 21.1  siming a homestead exemption adjustment on 4/01/19 and every	ebtor's retirement at place unknown chedule A/B: 21.1  which are the chedule A/B: 21.1  which are the chedule A/B: 21.1	ebtor's retirement at place ment chedule A/B: 21.1  Liming a homestead exemption of more than \$160,375? adjustment on 4/01/19 and every 3 years after that for cases find the chedule A/B: 21.1	chedule A/B: 17.1    100% of fair market value, up to any applicable statutory limit    100% of fair market value, up to any applicable statutory limit    100% of fair market value, up to any applicable statutory limit    100% of fair market value, up to any applicable statutory limit    100% of fair market value, up to any applicable statutory limit

		Document P	age 1	8 of 57		
Fill in this inform	ation to identify you	r case:				
Debtor 1	Michael A. Sche	eidt				
	First Name	Middle Name La	ast Name		-	
Debtor 2 (Spouse if, filing)	First Name	Middle Name La	ast Name		-	
(Spouse II, IIIIIIg)	i iist ivaille	Middle Name La	Striame			
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF ILLING	)IS		-	
Case number						
(if known)					☐ Chec	k if this is an
					amer	nded filing
O4: -: -! F	400D					
Official Form						
Schedule I	D: Creditors	Who Have Claims Se	cure:	∍d by Propert	У	12/15
		If two married people are filing together, to the transfer the entries, and attach it to the transfer in the t				
. Do any creditors I	have claims secured by	your property?				
☐ No. Check	this box and submit th	nis form to the court with your other sch	edules.	You have nothing else t	to report on this form.	
Yes. Fill in	all of the information b	below.				
Part 1: List All	Secured Claims					
2. List all secured o	claims. If a creditor has n	more than one secured claim, list the creditor	r separate	Column A	Column B	Column C
for each claim. If mo	ore than one creditor has	a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
much as possible, lis	st the claims in alphabetic	cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Ally Finance		Describe the property that secures the	claim:	\$32,278.00	\$22,790.00	\$9,488.00
Creditor's Name		2015 Dodge Caravan 6000 mile Held in j/t with non-filing spous				
P.O. Box 1	30424	As of the date you file, the claim is: Chec	ck all that			
	MN 55113-0004	apply.  Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the del	ot? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mort	gage or s	ecured		
Debtor 2 only		car loan)				
Debtor 1 and Del	,	☐ Statutory lien (such as tax lien, mechar	iic's lien)			
	e debtors and another	☐ Judgment lien from a lawsuit	hiolo I	000		
☐ Check if this cla community deb		Other (including a right to offset)	nicie L	.0an		
Date debt was incu	Opened 5/30/15	Last 4 digits of account number	4333	<b>3</b>		
Riverbrool	k Estatos					
2.2 Association		Describe the property that secures the	claim:	\$126.50	\$175,000.00	\$0.00
Creditor's Name		1303 Green Trails Drive Plainfie	∍ld, IL			
		60586 Will County				
	ia Chicagoland	As of the date you file, the claim is: Chec	l ck all that			
P.O. Box (	61955 AZ 85082-1955	apply.				
	City, State & Zip Code	Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the del	ot? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mort	gage or s	secured		
Debtor 2 only		car loan)				
Debtor 1 and Del	btor 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla	im relates to a	Other (including a right to offset)	sociati	on Fees		

community debt

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Debte	or 1 Michael A. Scheidt First Name Middle Na	ame Last Name	-	Case number (if know)		
	First Name ivildale Na	ame Last Name				
Date	debt was incurred	Last 4 digits of account numb	er <u>2561</u>			
	Wells Fargo Home					
1 / .5	Mortgage	Describe the property that secures the	ne claim:	\$155,000.00	\$175,000.00	\$0.00
	Creditor's Name	1303 Green Trails Drive Plair	field. IL			
	Attn: Bankruptcy Department	60586 Will County	,			
	3476 Stateview Blvd	As of the date you file, the claim is: (apply.	Check all that			
_	Fort Mill, SC 29715	☐ Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
Who	owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
	ebtor 1 only ebtor 2 only	☐ An agreement you made (such as n car loan)	nortgage or s	ecured		
	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	hanic's lien)			
	least one of the debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Cł	neck if this claim relates to a community debt	_	Mortgage			
Date (	Opened 7/27/12	Last 4 digits of account numb	er 2401			
Add	I the dollar value of your entries in C	olumn A on this page. Write that numb	er here:	\$187,404.	50	
	is is the last page of your form, add te that number here:	the dollar value totals from all pages.		\$187,404.	50	
Part :	2: List Others to Be Notified fo	r a Debt That You Already Listed				
trying than o	to collect from you for a debt you o	e notified about your bankruptcy for a we to someone else, list the creditor ir you listed in Part 1, list the additional is page.	n Part 1, and	then list the collection ager	ncy here. Similarly, if you I	ave more
	Name, Number, Street, City, State & 2 Pierce & Associates, P.C.	Zip Code	On wh	nich line in Part 1 did you ente	r the creditor? 2.3	
	1 N Dearborn Street # 1300 Chicago, IL 60602		Last 4	digits of account number		

			Do	ocument	Page 20 c	of 57	-	
Fill in	this inform	ation to identify your	case:					
Debto	or 1	Michael A. Scheid	lt					
Dobio	•	First Name	Middle Name	•	Last Name			
Debto								
(Spouse	e if, filing)	First Name	Middle Name		Last Name			
United	d States Ban	kruptcy Court for the:	NORTHERN D	ISTRICT OF IL	LINOIS			
Case	number							
(if know							☐ Check	if this is an
							amend	led filing
Ott: -	ial Famos	400E/E						
	ial Form				01-:			40/45
		F: Creditors W accurate as possible. Us						12/15
Schedu Schedu left. Att	ule G: Execute ule D: Credito ach the Conti and case num	acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec inuation Page to this pag ber (if known).  of Your PRIORITY Un	ired Leases (Offic ured by Property. e. If you have no i	ial Form 106G). I If more space is information to re	Do not include any needed, copy the	creditors with partially s Part you need, fill it out,	secured claims that a number the entries i	nre listed in nre the boxes on the
1. Do	any creditor	s have priority unsecure	d claims against y	ou?				
	No. Go to Pa	ırt 2.						
	Yes.							
po Pa	ssible, list the art 1. If more th	e of claim it is. If a claim ha claims in alphabetical orden nan one creditor holds a pa tion of each type of claim, s	er according to the or rticular claim, list th	creditor's name. If ne other creditors	f you have more that in Part 3.	n two priority unsecured c		
2.1	Christine	e Scheidt	Last	4 digits of accou	ınt number	\$2,491.52		\$0.00
	Priority Cred	ditor's Name		_				
	915 Colo		Whei	n was the debt in	ncurred?		_	
		ood, IL 60404 eet City State Zlp Code	As of	the date you file	e, the claim is: Che	ck all that apply		
٧		the debt? Check one.	_	ontingent	,	,		
ı	■ Debtor 1 on	nly		nliquidated				
[	Debtor 2 on	nlv	_	isputed				
_	_	nd Debtor 2 only		of PRIORITY un	secured claim:			
	_	e of the debtors and anothe	r <b>I</b> D	omestic support o	bligations			
_	_	is claim is for a commur			other debts you owe	the government		
		ubject to offset?				e you were intoxicated		
_	No	,		ther. Specify	, , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	☐ Yes		<b>-</b> •		omestic Suppo	ort Obligations		
Part 2		of Your NONPRIORIT						
3. Do	o any creditor	s have nonpriority unsec	ured claims agair	st you?				
	No. You have	e nothing to report in this p	art. Submit this forr	n to the court with	your other schedule	es.		
	Yes.							
un tha	secured claim	nonpriority unsecured class, list the creditor separately r holds a particular claim, li	for each claim. Fo	r each claim listed	d, identify what type	of claim it is. Do not list cl	aims already included	in Part 1. If more

Total claim

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Debtor 1 Michael A. Scheidt Case number (if know) 4.1 \$4,000.00 **Bruce Scheidt** Last 4 digits of account number Nonpriority Creditor's Name 238 Paddington Lane When was the debt incurred? Bolingbrook, IL 60440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Personal Loan ☐ Yes 4.2 **Capital One Bank** \$1,951.00 Last 4 digits of account number 1856 Nonpriority Creditor's Name P.O. Box 26625 When was the debt incurred? Opened 8/30/06 Richmond, VA 23261 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 **Capital One Bank** Last 4 digits of account number 4263 \$1,539.00 Nonpriority Creditor's Name P.O. Box 26625 When was the debt incurred? Opened 9/01/11 Richmond, VA 23261 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Michael A. Scheidt Case number (if know) 4.4 Carmela Esposito \$98,850.00 Last 4 digits of account number Nonpriority Creditor's Name 517 S Michigan Avenue When was the debt incurred? Villa Park, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Personal Loan ☐ Yes 4.5 Chase 8654 \$6,235.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 15298 When was the debt incurred? Opened 9/15/11 Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify 4.6 Chase Last 4 digits of account number 5298 \$571.00 Nonpriority Creditor's Name P.O. Box 15298 When was the debt incurred? Opened 7/05/07 Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Michael A. Scheidt Case number (if know) 4.7 \$2,179.00 Citibank Last 4 digits of account number 2770 Nonpriority Creditor's Name P.O. Box 6241 When was the debt incurred? Opened 5/28/14 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.8 Citibank/Best Buy Last 4 digits of account number 2607 \$3,359.00 Nonpriority Creditor's Name 50 Northwest Point Road When was the debt incurred? Opened 8/27/06 Elk Grove Village, IL 60007 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.9 Citibank/Home Depot Last 4 digits of account number 8779 \$3,357.00 Nonpriority Creditor's Name P.O. Box 6497 When was the debt incurred? Opened 11/29/11 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Credit Card

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Debtor 1 Michael A. Scheidt Case number (if know) 4.1 **Discover Card Services** 4691 \$2,562.00 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 15316 When was the debt incurred? Opened 2/04/13 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card - Lawsuit 2016 SC 4415 ☐ Yes 4.1 First Electronic Bank/Frys 1932 \$1,539.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 825 When was the debt incurred? Opened 11/16/11 Draper, UT 84020 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 Jercinovic Pediatrics Ltd. 2085 \$75.00 Last 4 digits of account number Nonpriority Creditor's Name 611 W Jefferson Street When was the debt incurred? Shorewood, IL 60404 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bill** Other. Specify

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Debtor 1 Michael A. Scheidt Case number (if know) 4.1 Kohl's Credit/Recovery 8397 \$763.00 Last 4 digits of account number 3 Nonpriority Creditor's Name P.O. Box 3004 When was the debt incurred? Opened 8/17/13 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 Linda Wierciak \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 124 S Harold Northlake, IL 60164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Personal Loan ☐ Yes 4.1 Mohela/Department of Education \$6,774.00 Several Last 4 digits of account number Nonpriority Creditor's Name 633 Spirit Dr When was the debt incurred? Opened 10/03/02 Chesterfield, MO 63005 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Student Loan

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Case number (if know) Debtor 1 Michael A. Scheidt 4.1 **Newegg.com Preferred Account** 8385 \$3,945.00 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 5138 When was the debt incurred? Timonium, MD 21094 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **Quest Diagnostics** 6990 \$278.50 Last 4 digits of account number Nonpriority Creditor's Name 1355 Mittel Boulevard When was the debt incurred? Wood Dale, IL 60191-1024 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill ☐ Yes 4.1 Silver Cross Hospital 9344 \$186.75 Last 4 digits of account number 8 Nonpriority Creditor's Name **Patient Accounts** When was the debt incurred? 1900 Silver Cross Blvd New Lenox, IL 60451-9508 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bill

☐ Yes

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Page 27 of 57 Case number (if know) Document Debtor 1 Michael A. Scheidt 4.1 \$2,000.00 Silver Cross Hospital Last 4 digits of account number 9 Nonpriority Creditor's Name **Patient Accounts** When was the debt incurred? 1900 Silver Cross Blvd New Lenox, IL 60451-9508 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical Bill 4.2 Souma Diagnostic 7519 \$1,260.35 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 110690 When was the debt incurred? Chicago, IL 60611 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill ☐ Yes 4.2 Synchrony Bank/Walmart 8881 \$6,207.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 965024 When was the debt incurred? Opened 7/24/13 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Credit Card

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

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Will Co Comm Health Center	Last 4 digits of account number	r 8606	\$95.00
Nonpriority Creditor's Name Will Co Health Department 501 Ella Avenue	When was the debt incurred?		-
Joliet, IL 60433  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	n is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	<u> </u>		
At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecur	ed claim:	
_	Student loans	ou old	
☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	paration agreement or divorce that you did not	
■ No	Debts to pension or profit-shar	ring plans, and other similar debts	
☐ Yes	Other. Specify Medical B		
Part 3: List Others to Be Notified About a De	ht That You Already Listed		_
. Use this page only if you have others to be notified a is trying to collect from you for a debt you owe to so have more than one creditor for any of the debts that notified for any debts in Parts 1 or 2, do not fill out of	about your bankruptcy, for a debt that omeone else, list the original creditor it you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection agenc	y here. Similarly, if you
Name and Address	On which entry in Part 1 or Part 2 did yo	_	
Client Services Inc. 3451 Harry Truman Blvd		Part 1: Creditors with Priority Unsecured Cla	
Saint Charles, MO 63301-4047		Part 2: Creditors with Nonpriority Unsecured	Claims
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
Credit Collection Services		☐ Part 1: Creditors with Priority Unsecured Cla	iims
725 Canton Street		Part 2: Creditors with Nonpriority Unsecured	Claims
Norwood, MA 02062	Last 4 digits of account number		
		P. et al. 1997	
Name and Address Estate Information Services LLC	On which entry in Part 1 or Part 2 did you Line <b>4.7</b> of ( <i>Check one</i> ):	ou list the original creditor?  Part 1: Creditors with Priority Unsecured Cla	ims
dba EIS Collections		■ Part 2: Creditors with Nonpriority Unsecured	
P.O. Box 1730		— Fait 2. Creditors with Nonphority Onsecured	Ciairis
Reynoldsburg, OH 43068-8730	Last 4 digits of account number		
Name and Address Global Credit & Collection Corp	On which entry in Part 1 or Part 2 did you Line <b>4.8</b> of ( <i>Check one</i> ):	ou list the original creditor? $\square$ Part 1: Creditors with Priority Unsecured Cla	ima
5440 N Cumberland # 300	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Chicago, IL 60656	'	Part 2: Creditors with Nonpriority Unsecured	Claims
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
	Line <u>4.7</u> of ( <i>Check one</i> ):	lacksquare Part 1: Creditors with Priority Unsecured Cla	ims
7831 Glenroy Rd #250	I	■ Part 2: Creditors with Nonpriority Unsecured	Claims
Minneapolis, MN 55439	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did yo	us list the original analitana	
		$\square$ Part 1: Creditors with Priority Unsecured Cla	ime
7831 Glenroy Rd # 250		Part 2: Creditors with Nonpriority Unsecured	
Minneapolis, MN 55439		— Fart 2. Oreditors with Northholity Oriseculed	Giaillis
	Last 4 digits of account number		
	On which entry in Part 1 or Part 2 did yo		
		Part 1: Creditors with Priority Unsecured Cla	
5620 Southwyck Blvd # 206 Toledo, OH 43614		Part 2: Creditors with Nonpriority Unsecured	Claims
	Last 4 digits of account number		

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Debtor 1 Michael A. Scheidt

Name and Address Weltman Weinberg & Reis Co, LPA 180 N LaSalle Street Suite # 2400 Chicago, IL 60601

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 2,491.52
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,491.52
				Total Claim
	6f.	Student loans	6f.	\$ 6,774.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 143,952.60
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 150,726.60

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number	Fill in this infor	rmation to identify your	case:		
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number	Debtor 1	Michael A. Schei	dt		
(Spouse if, filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number		First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number	Debtor 2				
Case number	(Spouse if, filing)	First Name	Middle Name	Last Name	
	United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
(if known)	Case number				
(. a.c.i.)	(if known)				

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or leas Name, Number, Street, City, State and ZIP Code	se State what the contract or lease is for
2.1 John A Reed 63 W Jefferson Street # 200 Joliet, IL 60432	Executory contract for post-petition attorney's fees in the approximate amount of \$ 785.00.  Debtor hereby assumes said contract.

		Docume	ent Page 31 d	ot 57	
Fill in thi	is information to identify you	r case:			
Debtor 1	Michael A. Sche	idt			
DCD(O)	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
				-	
Case nur (if known)	mber				☐ Check if this is an
(II KIIOWII)					☐ Check if this is an amended filing
					ae.aeag
Officia	al Form 106H				
Scho	dule H: Your Cod	Hahtors			12/15
SCITE	dule II. Toul Col	ACDIOI 3			12/15
ill it out, our nam	and number the entries in the and case number (if known	e boxes on the left. Attach n). Answer every question	the Additional Page .	to this page. On the to	needed, copy the Additional Page, p of any Additional Pages, write
1. DO	o you have any codebtors? (I	f you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
Arizo	ne 2 again as a codebtor only	a, Nevada, New Mexico, Pu ouse, or legal equivalent live otors. Do not include your rif that person is a guaran	erto Rico, Texas, Wash with you at the time? spouse as a codebto tor or cosigner. Make	nington, and Wisconsin.) r if your spouse is filin sure you have listed t	
out (	Column 2.		•	•	
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	
3.1	Name			☐ Schedule E, III	
				☐ Schedule C/F,	
				— Ochicadic O, III	
	Number Street City	State	ZIP Code		
	City	State	ZIF Code		
2.0				Поделене	
3.2	Name			Schedule D, lin	
				☐ Schedule E/F,	
				☐ Schedule G, Iir	ne
	Number Street				
	City	State	ZIP Code		

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Fill	in this information	to identify your ca	ase:				
De	btor 1	Michael A. S	scheidt				
	btor 2 ouse, if filing)						
Un	ited States Bankrup	otcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS			
	se number				☐ Ar		d filing ent showing postpetition chapter as of the following date:
0	fficial Form	106 <u>l</u>			M	M / DD/ Y	YYY
S	chedule I:	Your Inc	ome			, 22, .	12/15
spo atta Pa	rt 1: Describ	parated and you let to this form. be Employment	r spouse is not filing w	ng jointly, and your spouse is ith you, do not include informa onal pages, write your name a	tion about	your spo	
1.	Fill in your emplinformation.	loyment		Debtor 1		Debtor 2	or non-filing spouse
	If you have more		Employment status	■ Employed		☐ Emplo	pyed
	attach a separate			☐ Not employed		■ Not er	mployed
	employers.		Occupation	Technical Support			
	Include part-time self-employed wo		Employer's name	Burroughs Inc.			
	Occupation may or homemaker, if		Employer's address	558 Lamont Road Elmhurst, IL 60126			
			How long employed t	here? 3 months		_	
Pa	rt 2: Give De	etails About Mor	nthly Income				
	imate monthly incurse unless you are		ate you file this form. If	you have nothing to report for ar	y line, write	\$0 in the	space. Include your non-filing
	ou or your non-filing e space, attach a s			ombine the information for all em	ployers for t	hat perso	n on the lines below. If you need
					For Deb	tor 1	For Debtor 2 or non-filing spouse
_	List monthly gro	oss wages, sala	ry, and commissions (b	efore all payroll	. 4	474 70	0.00

2.

deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

0.00

0.00

0.00

4,171.70

4,171.70

0.00

+\$

3.

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Deb	tor 1	Michael A. Scheidt	_	(	Case	number (if know	n)				
					For	Debtor 1			Debtor filing s		
	Сор	y line 4 here	4.		\$	4,171.7	0	\$	9	0.00	<u></u>
5.	List	all payroll deductions:									
	5a. 5b.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a 5b		\$_ \$	506.5 0.0		\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c		\$ -	250.2		\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d		<b>\$</b> -	0.0	_	\$		0.00	_
	5e.	Insurance	5e	).	\$	948.8		\$		0.00	_
	5f.	Domestic support obligations	5f.		\$	605.4		\$		0.00	
	5g.	Union dues	5g	١.	\$_	0.0	_	\$		0.00	_
	5h.	Other deductions. Specify:	5h	1.+	\$	0.0	0	+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	2,311.2	20	\$		0.00	<del>-</del> )
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	1,860.5	0	\$		0.00	<u> </u>
8.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	8c 8d 8e 8e	). 	\$\$ \$\$\$ \$\$\$ \$\$\$\$	0.0 0.0 0.0 0.0 0.0	00 00 00 00 00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		0.00 0.00 0.00 0.00 0.00	
9.	8h. Add	Other monthly income. Specify:    all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	8h 9.	Г	*_ *	0.0		+ \$    \$		0.00	_
			Г						1		
10.		•	10.	\$_		1,860.50 +	<b> </b> \$_		0.00	= \$ _	1,860.50
	Aaa	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L								
11.	Inclu othe	the all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your in friends or relatives.  Not include any amounts already included in lines 2-10 or amounts that are not acity:	depe			•			chedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	1,860.50
13.		you expect an increase or decrease within the year after you file this form	?						·	Combi month	ned ly income
		No. Yes. Explain:									

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Fill	in this informa	tion to identify yo	our case:							
Deb		Michael A. S				Ch	eck if this	ic.		
		Wilchael A. 3	Cileiat					nded filing		
	tor 2 ouse, if filing)								wing postpetition chapt the following date:	er
` '	, 0,									
Unit	ed States Bankr	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DE	) / YYYY		
1	e number									
(If ki	nown)									
Of	fficial Fo	rm 106J								
So	chedule	J: Your l	Exper	ises					1	12/1
info	ormation. If m		eded, atta	If two married people and the character is the character sheet to this n.						
Par		ibe Your House	hold							
1.	Is this a joir									
	■ No. Go to	line 2. s Debtor 2 live i	in a separ	ate household?						
	□N		•							
	☐ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebtor 2.			
2.	Do you have	e dependents?	□ No							
	Do not list Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Depe age	endent's	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.			Son		1 m	onth	Yes	
					Daughter		2		□ No ■ Yes	
					Daagiitoi		_ <b>-</b> _		■ Yes ■ No	
					Son		9		□ Yes	
									□ No	
3.	Do your ext	enses include	_						☐ Yes	
0.	expenses of	f people other tl	han 👝	No Yes						
	yourself and	d your depende	nts? —	100						
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
Incl	luda avnansa	s naid for with r	non-cash	government assistance i	f you know					
the	value of such ficial Form 10	n assistance an	d have inc	sluded it on Schedule I:	Your Income			Your exp	enses	
4.				ses for your residence. I	nclude first mortgag	e 4.	\$		1,218.69	
	, ,	nd any rent for the	c ground 0	1 101.			·		<u> </u>	
	if not includ	led in line 4:								
		estate taxes	or rontor	e incurance		4a. 4b.	· —		0.00	
		rty, homeowner's maintenance, re	-	s insurance ipkeep expenses		4b. 4c.	·		0.00 50.00	
	4d. Home	owner's associat	ion or con	dominium dues		4d.	\$		23.00	
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

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Debtor 1	Michael A. Scheidt	Case num	ber (if known)	
6. Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	150.00
6b.	Water, sewer, garbage collection	6b.	\$	80.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
6d.	Other. Specify:	6d.	\$	0.00
Food	and housekeeping supplies	7.	\$	500.00
. Child	care and children's education costs	8.	\$	0.00
Cloth	ning, laundry, and dry cleaning	9.	\$	50.00
O. Pers	onal care products and services	10.	\$	50.00
1. Medi	cal and dental expenses	11.	\$	75.00
. Tran	sportation. Include gas, maintenance, bus or train fare.			
Do n	t include car payments.	12.	·	260.00
3. Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	20.00
. Char	itable contributions and religious donations	14.	\$	0.00
. Insu	ance.			
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	·	0.00
	Health insurance	15b.	*	0.00
	Vehicle insurance	15c.	\$	156.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec	·	16.	\$	0.00
	Ilment or lease payments:			
	Car payments for Vehicle 1	17a.	·	525.61
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify: Spouse vehicle payment	17c.	·	355.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		Φ.	0.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· ·	
	r payments you make to support others who do not live with you.		\$	0.00
Spec		19.		
	r real property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	· ·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
. Othe	r: Specify: Pets	21.	+\$	60.00
Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	3,823.30
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		°	3,023.30
			φ	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,823.30
3. Calc	ulate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,860.50
	Copy your monthly expenses from line 22c above.	23b.	·	3,823.30
		_00.	·	0,020.00
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	-1,962.80
For ex	ou expect an increase or decrease in your expenses within the year after your cample, do you expect to finish paying for your car loan within the year or do you expect your cation to the terms of your mortgage?			e or decrease because of a
■ Ye	es. Lyhiaiii neie.			

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Fill in this infor	mation to identify your	case:				
Debtor 1	Michael A. Scheidt					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number (if known)					☐ Check if this is an amended filing	
Official For	m 106Dec					
Declarat	tion About a	n Individual	<b>Debtor's Sch</b>	edules	12/15	
years, or both. 1	y or property by fraud ir I8 U.S.C. §§ 152, 1341, 1 In Below		ruptcy case can result in f	ines up to \$250,00	0, or imprisonment for up to 20	
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out ban	kruptcy forms?		
■ No						
☐ Yes.	Name of person		Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)			
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed v	with this declaratio	on and	
X /s/ Mic	chael A. Scheidt		X			
	el A. Scheidt ure of Debtor 1		Signature of De	ebtor 2		

Date

Date November 10, 2016

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Fill i	n this inforn	nation to identify you	r case:			
Debt	or 1	Michael A. Sche	idt			
	_	First Name	Middle Name	Last Name		
Debt (Spou	or 2 se if, filing)	First Name	Middle Name	Last Name		
Linite	ad States Bai	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
Office	eu States Dai	ikrupicy Court for the.	NORTHERN DISTRICT	DF ILLINOIS		
Case (if kno	e number _					Chapte if this is an
(II KIIO	wiii					Check if this is an amended filing
Off	icial Fo	rm 107				
			Affairs for Individ	duals Filing for B	ankruptcv	4/10
					equally responsible for sup	nlying correct
nfor	mation. If m	ore space is needed,	attach a separate sheet to		y additional pages, write yo	
numb	er (if knowr	n). Answer every que	stion.			
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. 1	What is you	· current marital statu	ıs?			
	_					
	Married					
	☐ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	No					
ĺ	_	t all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	I.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior Ac	dross:	Dates Debtor 2
	Debioi 111	ioi Address.	lived there	Debiol 21 Hor Ac	uicss.	lived there
3. 1	Within the la	st 8 vears, did vou ev	ver live with a spouse or led	aal equivalent in a commur	ity property state or territor	v? (Community property
					ico, Texas, Washington and V	
	■ No					
ĺ	_	ke sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
		,	,	,		
Part	2 Explai	n the Sources of You	r Income			
1 1	Did you have	e any income from en	nnlovment or from operating	ng a husiness during this v	ear or the two previous cale	ndar vears?
I	Fill in the tota	l amount of income yo	u received from all jobs and a	all businesses, including part	time activities.	nuai yeuro.
	f you are filir	g a joint case and you	have income that you receiv	e together, list it only once ur	nder Debtor 1.	
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and	Check all that apply.	(before deductions
				exclusions)		and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions,	\$12,468.43	☐ Wages, commissions,	
	aate you ille	a ioi balikiupicy.	bonuses, tips		bonuses, tips	
			☐ Operating a business		Operating a business	

Official Form 107

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Case number (if known)

Document Debtor 1 Michael A. Scheidt

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
	r last calen anuary 1 to		31, 2015 )	■ Wages, commissions, bonuses, tips	\$23,831.49	☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a business		☐ Operating a	business	
	r the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$928.00	☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a business		☐ Operating a	business	
	and other winnings.  List each s	public benef If you are fili	fit payments; ng a joint cas he gross inco	ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separa	rest; dividends; money colle you received together, list it	ected from lawsuits; only once under Do	royalties; an ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
	r the calendanuary 1 to			Unemployment	\$2,838.00			
Pa	rt 3: List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy			
6.	Are either No.	Neither De	ebtor 1 nor [	's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or househo	<mark>umer debts.</mark> Consumer del	bts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		□ No.	90 days befo	ore you filed for bankruptcy, di 7.	d you pay any creditor a to	tal of \$6,425* or mo	re?	
		□ Yes	paid that cr	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	nts for domestic support ob	e in one or more pay ligations, such as ch	ments and the mild support a	he total amount you and alimony. Also, do
		* Subject	to adjustmen	t on 4/01/19 and every 3 year	s after that for cases filed o	n or after the date of	of adjustment	
	Yes.			or both have primarily consu ore you filed for bankruptcy, di		tal of \$600 or more?	<b>?</b>	
		■ No.	Go to line 7	7.				
		□ Yes	include pay	each creditor to whom you pai rments for domestic support o r this bankruptcy case.				
	Creditor'	s Name and	d Address	Dates of payme	ent Total amount	Amount you	Was this p	payment for

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Case number (if known)

7.	Within 1 year before you filed for bankruptc Insiders include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.  No	tners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	rships of whic securities; ar	h you are a genera nd any managing a	al partner; corporations gent, including one for
	Yes. List all payments to an insider.  Insider's Name and Address	Dates of payment	Total amount paid	Amount yo		this payment
3.	Within 1 year before you filed for bankruptc insider? Include payments on debts guaranteed or cosic  No Yes. List all payments to an insider	gned by an insider.	nents or transfer a	ny property o	on account of a de	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ov		this payment itor's name
Pai	Within 1 year before you filed for bankruptc List all such matters, including personal injury of modifications, and contract disputes.  No Yes. Fill in the details.	y, were you a party in any				
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Wells Fargo Bank v Michael A. Scheidt 2016 CH 1041	Foreclosure Proceedings	Will County Cou 14 W. Jefferson Joliet, IL 60432		■ Pending □ On appe □ Conclud	
	Discover Bank v Michael Scheidt 2016 SC 4415	Unpaid account	Will County Co 14 W. Jefferson Joliet, IL 60432		■ Pending □ On appe □ Conclud	al
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below  ■ No. Go to line 11.  ☐ Yes. Fill in the information below.		rty repossessed, fo	oreclosed, ga	rnished, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property		D	ate	Value of the
		Explain what happened				property
1.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan solve the solve to make a payment becan solve the		-	D	ition, set off any a ate action was aken	nmounts from your Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an  ■ No □ Yes		rty in the possession			efit of creditors, a

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Case number (if known) Document Debtor 1 Michael A. Scheidt

Pai	tt 5: List Certain Gifts and Contributions	s			
13.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift.	uptcy,	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	0	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru  ■ No  □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a tota	ıl value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling?	ptcy o	r since you filed for bankruptcy, did you lose anyt	thing because of the	it, fire, other disaster,
	☐ Yes. Fill in the details.				
		Includ	ribe any insurance coverage for the loss le the amount that insurance has paid. List pending ance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfers	;			
16.	consulted about seeking bankruptcy or p	repar	did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	John A Reed 63 W Jefferson Street # 200 Joliet, IL 60432		\$ 415.00 + costs paid	October 2016	\$750.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	litors (		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Case number (if known) Document

Debtor 1 Michael A. Scheidt

18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already  No Yes. Fill in the details.	siness or financial affa e as security (such as the	i <b>irs?</b> he granting of a se			
	Person Who Received Transfer Address Person's relationship to you	Description and very property transferr		Describe any payments recapid in exchain	eived or debts	Date transfer was made
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No Yes. Fill in the details.		y property to a se	elf-settled trust o	or similar device of	which you are a
	Name of trust	Description and v	alue of the prope	rty transferred		Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Insti	ruments, Safe Deposit	Boxes, and Stora	age Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No  Yes. Fill in the details.	other financial accour	nts; certificates of	-		
		ast 4 digits of account number	Type of account instrument	or Date acclosed moved transfer	, or	Last balance before closing or transfer
<ul> <li>Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for sec cash, or other valuables?</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the con	tents	Do you still have it?
22.	Have you stored property in a storage unit or  ■ No □ Yes. Fill in the details.	place other than your	home within 1 ye	ar before you fil	led for bankruptcy	?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the con	tents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else				
23.	Do you hold or control any property that some for someone.  No Yes. Fill in the details.	eone else owns? Inclu	ide any property	you borrowed fr	om, are storing fo	r, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		escribe the prop	perty	Value
	t 10: Give Details About Environmental Infor	mation				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Michael A. Scheidt

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.							
Rep	ort a	all notices, releases, and proceedings that	at you know about, regardless of wher	the	y occurred.			
24.	Has	las any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
		No						
	_	Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	t	Environmental law, if you know it	Date of notice		
25.	Hav	Have you notified any governmental unit of any release of hazardous material?						
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Hav	re you been a party in any judicial or adn	ninistrative proceeding under any envi	ronn	nental law? Include settlements a	nd orders.		
	■ No □ Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case		
Par	t 11:	Give Details About Your Business or	Connections to Any Business					
		_		v of	the following connections to any	husiness?		
27.	VVIL	thin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
		_			-			
		<ul> <li>□ A member of a limited liability company (LLC) or limited liability partnership (LLP)</li> <li>□ A partner in a partnership</li> </ul>						
		☐ An officer, director, or managing exc	ecutive of a corporation					
		☐ An owner of at least 5% of the voting	·					
		No. None of the above applies. Go to F						
	_	Yes. Check all that apply above and fill		<b>.</b>				
	Bu	siness Name	Describe the nature of the business	-	Employer Identification number			
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security r	number or ITIN.		
					Dates business existed			
28.		hin 2 years before you filed for bankrupt citutions, creditors, or other parties.	cy, did you give a financial statement t	o an	yone about your business? Inclu	de all financial		
		No						
		Yes. Fill in the details below.						
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued					
_	_							

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 16-35921 Doc 1 Filed 11/10/16 Entered 11/10/16 15:00:25 Page 43 of 57
Case number (if known) Document

Debtor 1 Michael A. Scheidt

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Michael A. Scheidt Signature of Debtor 2 Michael A. Scheidt Signature of Debtor 1 Date November 10, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Official Form 107

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Debtor 1	Michael A. Schei	dt		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Case number	ankruptcy Court for the:	NORTHERN DISTRICT	<u> </u>	
if known)				☐ Check if this is ar amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Ally Financial name:	<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No
Description of property securing debt:  2015 Dodge Caravan 6000 miles Held in j/t with non-filing spouse	<ul><li>■ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	■ Yes
Creditor's Riverbrook Estates Association	■ Surrender the property.	□ No
name:  Description of property securing debt:  1303 Green Trails Drive Plainfield, IL 60586 Will County	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	■ Yes
Creditor's Wells Fargo Home Mortgage	■ Surrender the property.  □ Retain the property and redeem it.	□ No
Description of property  1303 Green Trails Drive Plainfield, IL 60586 Will County	<ul> <li>☐ Retain the property and redeem it.</li> <li>☐ Retain the property and enter into a Reaffirmation Agreement.</li> <li>☐ Retain the property and [explain]:</li> </ul>	■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Case number (if known)
ecutory Contracts and Unexpired Leases (Official Form 106G), fill leases that are still in effect; the lease period has not yet ended. of assume it. 11 U.S.C. § 365(p)(2).
Will the lease be assumed?
□ No
☐ Yes
ny property of my estate that secures a debt and any personal
gnature of Debtor 2

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-35921 Doc 1 Filed 11/10/16 Entered 11/10/16 15:00:25 Desc Main Document Page 50 of 57

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In re	Michael A. Scheidt		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPENSA	TION OF ATTO	RNEY FOR D	EBTOR(S)			
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and the compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For legal services, I have agreed to accept		\$	1,200.00			
	Prior to the filing of this statement I have received			415.00			
	Balance Due			785.00			
2. \$	\$ 335.00 of the filing fee has been paid.						
3. T	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4. T	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5. <b>I</b>	■ I have not agreed to share the above-disclosed compensation	on with any other person	n unless they are men	nbers and associates of my law firm.			
[	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.</li> </ul>							
7. B	By agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any adversa		ng service:				
CERTIFICATION							
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.							
No	November 10, 2016	/s/ John A. Reed	<b>i</b>				
	Date	John A. Reed					
		Signature of Attorn John A. Reed Lt 63 W. Jefferson Joliet, IL 60432	td.				

Name of law firm

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# CLIENT AUTHORIZATION AND BIFURCATED RETAINER AGREEMENT

I/We	Michael A.	Scheidt	do hereby retain the firm of JOHN					
A PEEDITO A	ttorney At Law	to perform the following	bifurcated legal service(s):					
1. Pre-filing Bankruptcy 7 preparation – flat fee: \$ 750.00								
2. OPTIONAL: POST BANKRUPTCY FILING REPRESENTATION.								
If election made, payment to be made for services rendered at hourly rate.								
are based upon the misrepresented an significant factors client; review required price	e facts and inform by facts or failed to supon which the ew monthly bud or to filing p	nation I/we provided and to provide any significant retention is based is as fo get with client; dis- etition; determine v.	ice provided and fee quoted below that I/we have not knowingly information. The summary of the initial consultation with cuss credit & budget counseling alue of vehicles & fair market hedules meeting of creditors					
TOTAL EST FEE	ES & COSTS \$_							
remaining balance above. Upon con any further liabili be signed confirm \$750.00 Absent such payn prepared. The resofthe schedules.	e. This fee reflection of Banki ty from client. String the subsequence white has been to the subsequence with the beautiful of the beautiful beau	tes the projected costs of the cuptey Petition and Sched hould client elect to procent representation of courseen paid prior to any reason fees of \$00  Sees and/or costs shall be the the costs	The optional post-filing fees are \$ 335.00 and are to be paid in the legal services to be performed per lules, contract can terminate without eed, a Reaffirmation and Waiver shall asel. A Non-Refundable Retainer of expresentation being undertaken.  CTED and no pleadings will be shall be paid upon completion paid as follows: #50.00					
orders. Payment in a will be charged a \$ ?	different manner w 25.00 fee and must	ill delay filings approximately be redeemed.	seven days. PLUS: Any returned checks					
I/wa unda	retand that at my	sole ontion, this agreeme	ent can be terminated at my/our sole					

I/we understand that at my sole option, this agreement can be terminated at my/our sole discretion upon the completion of the pleadings. I/we can assume responsibility for the filing of the pleadings or pay the above-cited costs and have JOHN A. REED LTD. file the pleadings. Such action would be in the limited capacity as preparer and not require any further legal representation.

I/we have been advised that should I/we elect the exercise the option to have representation post-filing, attorneys fees will be incurred for those services. Those services will be in addition to the flat fee preparation fee previously paid. I/we agree to pay such funds as may be reasonably incurred at a rate of \$ 225.00 per hour. Should JOHN A. REED determine,

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in his professional opinion and judgment, that additional fees or costs are to be incurred, I/we shall be provided with an explanation as to why such costs are required and outside the scope of the original hourly fee projection.

The office of the United States Trustee is currently conducting random audits in a small percentage of cases. This office has no control over which cases receive said audits. Additional fees and costs will be charged if your case is chosen for such audit.

I/we acknowledge that, unless I/we specifically instruct JOHN A. REED not to undertake such actions, I/we shall be liable for these fees and costs reasonably incurred. Should JOHN A. REED be so instructed not to take the contemplated action, JOHN A. REED and JOHN A. REED LTD. reserve the right to cease representation immediately without waiving their entitlement to costs and fees outstanding as of that date.

I also agree to cooperate with JOHN A. REED LTD so as to assist in his representation of me. Such actions would include, both pre-filing and, if applicable, post-filing. The required actions include but are not limited to attending meetings, conferences, executing documents, appearing in Court, providing information and documents requested by Counsel, and making a full disclosure of any relevant facts or changes in circumstances in a timely fashion. I/we acknowledge that any non-compliance may irreparably damage my legal position and impair the ability of Counsel to represent my interests. As a result, JOHN A. REED LTD, reserves the right to cease acting as my attorney in such a situation and I/we hereby consent to his ability to withdraw as counsel.

Should JOHN A. REED LTD. withdraw or otherwise cease acting as my attorney for any reason, I/we agree to pay any and all fees and costs that are due and owing at said time. In the event any collection action, including but not limited to filing suit, is instituted to compel payment, I agree to pay all such collection costs, including interest and attorney's fees. This agreement is being entered into in Will County, Illinois.

Agreed to and approved this date:

DATE: November 10, 2016

CLIENT

Address: 1303 Green Trails Drive

Plainfield IL 60586

Home Phone #

Work Phone #

PREPARED BY:

John A. Reed

JOHN A. REED LTD.

63 W. Jefferson Street # 200

Joliet IL 60432

Ph 815/726-9100

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**Note:** Regardless of which option you elect, you will be provided with copies of all substantive pleadings and correspondence concerning this matter during the course of our representation of you. To insure the safe keeping of these documents, we suggest you store all such materials in a safe place. After the matter is closed, should you so require them, additional copies may be obtained from our office by paying the standard retrieval and copying costs. At present, those fees are \$ 25.00. Please note that, due to storage constraints, your file will be destroyed after seven (7) years.

### **United States Bankruptcy Court** Northern District of Illinois

In re	Michael A. Scheidt		Case No.		
		Debtor(s)	Chapter	7	
	VERIFICATION OF CREDITOR MATRIX				
	Number of Creditors:				
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	November 10, 2016	/s/ Michael A. Scheidt Michael A. Scheidt Signature of Debtor			

Ally Financial P.O. Box 130424 Roseville, MN 55113-0004

Bruce Scheidt 238 Paddington Lane Bolingbrook, IL 60440

Capital One Bank P.O. Box 26625 Richmond, VA 23261

Carmela Esposito 517 S Michigan Avenue Villa Park, IL 60181

Chase P.O. Box 15298 Wilmington, DE 19850-5298

Christine Scheidt 915 Colonade Shorewood, IL 60404

Citibank P.O. Box 6241 Sioux Falls, SD 57117

Citibank/Best Buy 50 Northwest Point Road Elk Grove Village, IL 60007

Citibank/Home Depot P.O. Box 6497 Sioux Falls, SD 57117

Client Services Inc. 3451 Harry Truman Blvd Saint Charles, MO 63301-4047

Credit Collection Services 725 Canton Street Norwood, MA 02062

Discover Card Services P.O. Box 15316 Wilmington, DE 19850

Estate Information Services LLC dba EIS Collections P.O. Box 1730 Reynoldsburg, OH 43068-8730

First Electronic Bank/Frys P.O. Box 825 Draper, UT 84020

Global Credit & Collection Corp 5440 N Cumberland # 300 Chicago, IL 60656

Jercinovic Pediatrics Ltd. 611 W Jefferson Street Shorewood, IL 60404

Kohl's Credit/Recovery P.O. Box 3004 Milwaukee, WI 53201

Linda Wierciak 124 S Harold Northlake, IL 60164

Mohela/Department of Education 633 Spirit Dr Chesterfield, MO 63005

Newegg.com Preferred Account P.O. Box 5138 Timonium, MD 21094

Northland Group Inc 7831 Glenroy Rd # 250 Minneapolis, MN 55439

Pierce & Associates, P.C. 1 N Dearborn Street # 1300 Chicago, IL 60602 Quest Diagnostics 1355 Mittel Boulevard Wood Dale, IL 60191-1024

Riverbrook Estates Association c/o Associa Chicagoland P.O. Box 61955 Phoenix, AZ 85082-1955

Silver Cross Hospital Patient Accounts 1900 Silver Cross Blvd New Lenox, IL 60451-9508

Souma Diagnostic PO Box 110690 Chicago, IL 60611

Synchrony Bank/Walmart P.O. Box 965024 Orlando, FL 32896

United Collection Bureau Inc 5620 Southwyck Blvd # 206 Toledo, OH 43614

Wells Fargo Home Mortgage Attn: Bankruptcy Department 3476 Stateview Blvd Fort Mill, SC 29715

Weltman Weinberg & Reis Co, LPA 180 N LaSalle Street Suite # 2400 Chicago, IL 60601

Will Co Comm Health Center Will Co Health Department 501 Ella Avenue Joliet, IL 60433